COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that

ERES PCT/PTO A 9, NOV 2004

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: <u>ADHESIVE TRANSDERMAL FORMULATIONS OF DICLOFENAC SODIUM</u>

the enc	ecification of which: (che	ock one)				
ine spe	cincation of which. (che	REGULAR OR DESIG	N ADDI ICATION			
_		REGULAR OR DESIG	N APPLICATION			
	is attached hereto.					
	was filed on as application Serial No					
	and was amended or	n (if	applicable).			
	PC	CT FILED APPLICATION ENT	ERING NATIONAL STAGE			
\boxtimes	was described and claimed in International application No. PCT/EP02/13473 filed on novembre 26, 2002 and as amended on(if any).					
I hereb claims,	y state that I have revi as amended by any am	ewed and understand the con endment referred to above.	tents of the above-identified sp	pecification, including the		
l ackno Regula	wledge the duty to discitions, §1.56.	ose information which is mater PRIORITY (ial to patentability as defined in	Title 37, Code of Federal		
ing dat	e before that of the appli	cation on which priority is claim PRIOR FOREIGN AF				
	Country	Application	Date of Filing	Priority		
<u></u>		Number	(day, month, year)	Claimed		
	Italy	MI2001A002827	28 dicembre 2001	Yes		
I hereb tion(s)	y claim the benefit unde listed below:	r Title 35, United States Code ﴿	§119(e) of any United States pro	ovisional patent applica-		
Applica	tion No.	Filing Date	Status (patented,	pending abandoned)		
(Comp	lete this part only if this i	s a continuing application.)				
ject ma provide patenta	tter of each of the claim of by the first paragraph ability as defined in Title	s of this application is not disclor of 35 USC 112, I acknowled	tates application(s) listed below osed in the prior United States ge the duty to disclose informatis §1.56 which became availabing date of this application:	application in the manner ation which is material to		
Applica	tion No.	Filing Date	Status (patented.	pending abandoned)		

POWER OF ATTORNEY

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

As a named inventor, I hereby appoint the registered patent attorneys represented by Customer No. 00466 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith, including: Robert J. PATCH, Reg. No. 17,355, Andrew J. PATCH, Reg. No. 32,925, Robert F. HARGEST, Reg. No. 25,590, Benoît CASTEL, Reg. No. 35,041, Thomas W. PERKINS, Reg. No. 33,027, Roland E. LONG, Jr., Reg. No. 41,949, Eric JENSEN, Reg. No. 37,855, Liam MCDOWELL, Reg. No. 44,231, and Philip A. DUBOIS, Reg. No. 50,696,

c/o YOUNG & THOMPSON Second Floor 745 South 23rd Street Arlington, Virginia 22202

Customer Number 00466

Address all telephone calls to Young & Thompson at 703/521-2297. Telefax: 703/685-0573.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Full name of sole or first inventor: Giuseppe PASSONI							
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Inventor's signature:		Date:					
Residence:		Citizenship:					
Post Office Address:							